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## SHERIFF'S OFFICE

50 NORTH DUKE STREET, P.O. BOX 83480, LANCASTER, PENNSYLVANIA 17608-3480 • (717) 299-8200

SHERIFF SERVICE  
PROCESS RECEIPT, and AFFIDAVIT OF RETURNPLEASE TYPE OR PRINT LEGIBLY.  
DO NOT DETACH ANY COPIES.1. PLAINTIFF/S UNITED STATES OF AMERICA2. COURT NUMBER 02 CV 48573. DEFENDANT/S/ ROBIN L. GOOD4. TYPE OF WRIT OR COMPLAINT SUMMONS & FEDERAL COMP.

SERVE



AT

5. NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO BE SERVED. ROBIN L. GOOD6. ADDRESS (Street or RFD, Apartment No., City, Boro, Twp., State and ZIP Code) 279 DUKE STREET, EPHRATA, PA 17522-20327. INDICATE UNUSUAL SERVICE: ☐ DEPUTIZE ☐ OTHERNow, 20, I, SHERIFF OF LANCASTER COUNTY, PA., do hereby deputize the Sheriff of County to execute this Writ and make return thereof according to law. This deputation being made at the request and risk of the plaintiff.

SHERIFF OF LANCASTER COUNTY

## 8. SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE:

~~PLEASE POST THE PREMISES IN ACCORDANCE~~  
~~W/ THE COURT ORDER ON THE SUMMONS &~~  
~~FEDERAL COMP.~~

THANKS.

AS PER COURT ORDER DATED 11/25/02

NOTE ONLY APPLICABLE ON WRIT OF EXECUTION: N.B. WAIVER OF WATCHMAN - Any deputy sheriff levying upon or attaching any property under within writ may leave same without a watchman, in custody of whomever is found in possession, after notifying person of levy or attachment, without liability on the part of such deputy or the sheriff to any plaintiff herein for any loss, destruction or removal of any such property before sheriff's sale thereof.

9. SIGNATURE OF ATTORNEY OR OTHER ORIGINATOR Michael J. McKeever / MW10. TELEPHONE NUMBER 215-627-132211. DATE 11-26-02

12. SEND NOTICE OF SERVICE COPY TO NAME AND ADDRESS BELOW (This area must be completed if notice is to be mailed)

Suite 500 The Bourse Building  
111 S. Independence Mall East  
Philadelphia, Pennsylvania 19106

## SPACE BELOW FOR USE OF SHERIFF ONLY - DO NOT WRITE BELOW THIS LINE

13. I acknowledge receipt of the writ or complaint as indicated above.

NAME of Authorized LCSO Deputy or Clerk

ANNETTE WALTON (717) 295-3609

14. Date Received

12/2/02

15. Expiration/Hearing date

1/31/02

16. I hereby CERTIFY and RETURN that I ☐ have personally served, ☐ have legal evidence of service as shown in "Remarks", ☒ have executed as shown in "Remarks", the writ or complaint described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., at the address inserted below by handing a TRUE and ATTESTED COPY thereof.17. ☐ I hereby certify and return a NOT FOUND because I am unable to locate the individual, company, corporation, etc., named above. (See remarks below)

18. Name and title of individual served (if not shown above) (Relationship to Defendant)

19. ☐ No Service  
See Remarks Below (No. 30)

20. Address of where served (complete only if different than shown above) (Street or RFD, Apartment No., City, Boro, Twp. State and Zip Code)

21. Date of Service

22. Time

1-2-03 7:50  
AM  
PM  
EST  
EOST

23. ATTEMPTS	Date	Miles	Dep. Int.	Date	Miles	Dep. Int.	Date	Miles	Dep. Int.	Date	Miles	Dep. Int.	Date	Miles	Dep. Int.
1/2	26	N/A													

24. Advance Costs

R 124693

150.00

25. Service Costs

42.50

26. Notary Cert.

27. Mileage/Postage/N.F.

9.48

28. Total Costs

51.98

29. COST DUE OR REFUND

98.02

30. REMARKS:

S.T.A.:

I POSTED FRONT GLASS DOOR  
OF HOME.

Ch. 37956  
1/6/03

31. AFFIRMED and subscribed to before me this

3rd

32. Signature of  
Dep. Sheriff

SO ANSWER

33. Date

1-2-03